

CLAIMS ONLY						Application Number 10/601,568	Filing Date	
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend		
1							51	
2							52	
3							53	
4	X						54	
5							55	
6							56	
7							57	
8							58	
9							59	
10							60	
11							61	
12							62	
13	X						63	
14							64	
15							65	
16							66	
17							67	
18							68	
19							69	
20	X						70	
21							71	
22							72	
23							73	
24							74	
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27							77	
28							78	
29							79	
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41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	3						Total Indep	
Total Depend	19						Total Depend	
Total Claims	22						Total Claims	